## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10720165

| CLAIMS AS FILED - PART I (Column 1) (Column 1)  |   |   |              |                                   |                   | ımn 2)           |                 | SMALL ENTITY TYPE  |                        |    | OTHER THAN OR SMALL ENTITY |                        |
|---|---|---|--------------|-----------------------------------|-------------------|------------------|-----------------|--------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS  |   |   | 1            |                                   |                   |                  | 1               | RATE               | FEE                    | 1  | RATE                       | FEE                    |
| FOR   |   |   | NUMBER FILED |                                   | NUMB              | IER EXTRA        |                 | BASIC FEE          | 385.00                 | OR | BASIC FEE                  | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 15 minus 20= |                                   | • 0               |                  |                 | X\$ 9=             |                        | OR | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |   |   | 1 minus 3 =  |                                   | 0                 |                  | ļ.              | X43=               |                        | OR | X86=                       |                        |
| MU  | ILTIPLE DEPE  | NDENT CLAIM P                             | RESENT       |                                   |                   |                  | ]               | +145=              |                        | OR | +290=                      | 2910                   |
| * If the difference in column 1 is less than zero, enter "0" in col                   |   |   |              |                                   |                   | column 2         | •               | TOTAL              |                        | OR | TOTAL                      | 1060                   |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                          |   |   |              |                                   |                   |                  | <u>)</u>        | SMALL              | ENTITY                 | OR | OTHER<br>SMALL             |                        |
| AMENDMENT A   | 9/15/05   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUME<br>PREVIO<br>PAID I  | BER<br>BUSLY      | PRESENT<br>EXTRA |                 | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | . 7                                       | Minus        | # 2                               | 3_                | =                | ] [             | X\$ 9=             | -                      | OR | X\$18=                     |                        |
|   | Independent   | · 3                                       | Minus        | ئ. ہیں                            | 3                 |                  | 1 [             | X43=               |                        | OR | X86=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |              |                                   |                   |                  |                 | +145=              |                        | OR | +290=                      |                        |
|   |   |   |              |                                   |                   |                  |                 | TOTAL<br>ODIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE        |                        |
|   |   | (Column 1)                                |              | (Colun                            | nn 2)             | (Column 3)       |                 |                    |                        |    |                            |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUME<br>PREVIO<br>PAID I  | BER<br>JUSLY      | PRESENT<br>EXTRA |                 | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus        | 4+                                |                   | =                |                 | X\$ 9=             |                        | OR | X\$18=                     |                        |
|   | Independent   | *   | Minus        | ***                               | 01.4414           | -                | 4 1             | X43=               |                        | OR | X86=                       |                        |
|   | FIRST PRESE   | NTATION OF MU                             | LIPLE DEP    | ENDENT                            | CLAIM             |                  | <b>」</b> 「      | +145=              | · .                    | OR | +290=                      |                        |
|   |   |   |              |                                   |                   | •                | <b>ل</b> .<br>م | TOTAL<br>DDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE        |                        |
|   |   | (Column 1)                                | :            | (Colum                            | າກ 2)             | (Column 3)       |                 | JUN 1 CC -         |                        | •  |                            |                        |
| MEN   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |              | HIGHE<br>NUME<br>PREVIO<br>PAID F | ST<br>BER<br>USLY | PRESENT<br>EXTRA |                 | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus        | **                                |                   | = <u>.</u>       |                 | X\$ 9=             |                        | OR | X\$18=                     |                        |
|   | Independent   | •   | Minus        | ***                               |                   | =                | 11              | X43=               |                        | OR | X86=                       |                        |
| لـ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                   |                   |                  |                 | +145=              |                        |    | +290=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |              |                                   |                   |                  |                 | TOTAL              |                        | OR | TOTAL                      |                        |
| ****  | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |   |              |                                   |                   |                  |                 |                    |                        |    |                            |                        |